REPORT OF PERSON SPENDING \$5,000 OR MORE TO INFLUENCE LEGISLATIVE OR ADMINISTRATIVE ACTION

(Government Code Section 86116)

	(Government Code Section	100110)		1	1/4
FORM 645 1993					
REPORT COVERS	S PERIOD FROM 01/01/2023	THROUGH	03/31/2023	FC	PR OFFICIAL USE ONLY
CUMULATIVE PE	RIOD BEGINNING	01/01/202	3	A	
	TYPE OR PRINT IN INK				
For information required to be provided to you purs Manual on Lobbying Disclosure Provisions of the F		of 1977, see	Information_	В	
NAME OF FILER:					
CONVENTION OF STATES ACTION				T	
BUSINESS ADDRESS: (Number and Street)	(City)	(State)	(Zip Code)	TELE	EPHONE NUMBER:
PART I - LEGISLATIVE OR STATE AGENC	HOUSTON	TX	77057		
	SUMMARY OF PAYMENTS TH	S PERIOD			
A. Total Activity Expenses (Part II, Se	ection A)			\$	0.00
B. Total Other Payments to Influence	e (Part II, Section B)			\$	11249.85
Total (A + B above)				\$	<u>11249.85</u>
C. Total Payments in Connection wit	h PUC Activities (Part II, Section C)			\$	0.00
CAMPAIGN CONTRIBUTIONS:	Part III completed and attached		X No campaign c	ontributio	ns made this period
	VERIFICATION				
I have used all reasonable diligence in information contained herein and in the				the bes	t of my knowledge the
I certify under penalty of perjury unde	r the laws of the State of Califor	nia that the	e foregoing is tr	ue and o	correct.
Executed on (Date) 04/26/2023	At (City and State) Irvine,CA		By (Signature of Fi William Kelly	ler or Resp	onsible Officer)
Name of Filer or Responsible Officer (Type or Print) William Kelly	1		Title Staff Counsel		

PERIOD COVERED: 01/01/2023 03/31/2023

NAME OF FILER: CONVENTION OF STATES ACTION

PART II - PAYMENTS MADE THIS PERIOD						
A. ACTI	VITY EXPENSES (See instructions on	reverse.)				
Date	Name and Address of Payee			Description of Consideration	Total Amount of Activity	
			\$		\$	
If more space is needed, check box and attach continuation sheets. TOTAL SECTION A (Activity Expenses). Also enter the total of Section A on Line A of the Summary of Payments section on page 1.					\$	0.00
B. OTHER PAYMENTS TO INFLUENCE LEGISLATIVE OR ADMINISTRATIVE ACTION NOTE: State and local government agencies do not complete this section. Check the box and complete Attachment Form 640 instead. 1. PAYMENTS TO LOBBYING COALITIONS (NOTE: Attach Form 630.) \$ 0.00 2. OTHER PAYMENTS \$ 11249.85						
			Also ente on Line B	ECTION B (1 + 2). r the total of Section B of the Summary of s section on page 1.	\$	11249.85
C. PAYMENTS IN CONNECTION WITH ADMINISTRATIVE TESTIMONY IN RATEMAKING PROCEEDINGS BEFORE THE CALIFORNIA PUBLIC UTILITIES COMMISSION (See instructions on reverse.) Also enter the total of Section C on Line C of the Summary of Payments section on page 1.					\$	0.00

NAME OF FILER: CONVENTION OF STATES ACTION					
to or on beh	CAMPAIGN CONTRIBUTIONS MADE (Monetary and non-monetar alf of state candidates, elected state officers and any of their controlled corr officers must be reported in A or B below.)				
in a iden Name of	 A. If the contributions made by you during the period covered by this report, or by a committee you sponsor, are contained in a campaign disclosure statement which is on file with the Secretary of State, report the name of the committee and its identification number, if any, below. Name of Major Donor or Recipient Committee Which Has Filed A Campaign Disclosure Statement: 				
	tributions of \$100 or more which have not been reported on a campaign of the by an organization's sponsored committee, must be itemized below.	disclosure statement, inc	luding contributions		
Date	Name of Recipient	I.D. Number if Committee	Amount		
			\$		
If mor	re space is needed, check box and attach continuation sheets.				

PERIOD COVERED: 01/01/2023 --03/31/2023

NOTE: Disclosure in this report does not relieve a filer of any obligation to file the campaign disclosure statements required by Gov. Code Section 84200, et seq.

Attachment Form 640

(Attachment to Form 635 or Form 645)

CALIFORNIA 1993 FORM

		4/4
PERIOD COVERED: 01/01/2023 03/31/2023 NAME OF FILER: CONVENTION OF STATES ACTION	_	
For Use By: A state or local government agency that qualifies a instructions on the cover page before completing t		00 filer. Refer to the
Other Payments to Influence Legislative or Administrative Action:		
Total payments for overhead expenses related to lobbying activi Report as a lump sum.		\$\$
Total payments to Lobbying Coalitions. Report as a lump sum. (Form 630 must be attached)	\$0.00	
Total payments of less than \$250 during the calendar quarter for activity (excluding overhead). Report as a lump sum	\$ <u>3298.63</u>	
Total payments of more than \$250 during the calendar quarter for activity (excluding overhead). Such payments must be itemized	\$ <u>7951.22</u>	
 Grand total of "Other Payments to Influence Legislative or Admin Action." Also enter this total on the appropriate line of the Sumn Payments section on Page 1 of Form 635 or Form 645. 	\$ 11249.85	
legislative session covered by the report. Also itemize dues or similar payments of \$250 or more made to total expenditures or \$15,000 or more in a calendar quarter to in organization's name and address, the amount paid to the organithe organization since January 1 of the biennial legislative sessions.	fluence legislative or administrate zation during the quarter, and the	tive action. Provide the
Name & Address of Payee	Amount This Quarter	Cumulative Amount Since January 1
P] - Various (Coordinated by The Richard Norman Company)	\$ 7951.22	\$ 7951.22
eesburg VA 20176		
	\$	\$
	\$	\$
Subtotal of all payments itemized above	\$ 7951.22	

Subtotal of all payments itemized above

If more space is needed, check box and attach

continuation sheets.